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PTO/SB/01 (6-95)

OMB 0651-0032

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE0010/PTO  
Rev. 6/95U.S. Department of Commerce  
Patent and Trademark Office**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION**☐ Declaration OR  
Submitted  
with Initial Filing☒ Declaration  
Submitted after  
Initial Filing

Attorney Docket Number

P/61801

First Named Inventor

G. Butler

COMPLETE IF KNOWN

Application Number

09/450,055

Filing Date

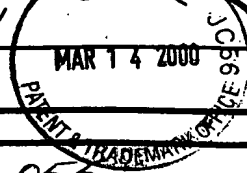
NOVEMBER 29, 1999

Group Art Unit

2874

Examiner Name

MAR 14 2000



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS OF CONTROLLING A LASER IN A WDM APPLICATION

(Title of the Invention)

the specification of which

☐ is attached hereto  
OR☒ was filed on (MM/DD/YYYY)

November 29th 1999

as United States Application Number or PCT International

Application Number

09/450,055

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9919047.2	GB	Aug. 13th 99 08-13-99	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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# DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §385(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number or label   
OR  
☒ List attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
David B. Kirschstein, Esq.	17,244		
Alan Israel, Esq.	27,564		
Martin W. Schiffmiller, Esq.	30,421		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☐ Customer Number or label  OR ☒ Fill in correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

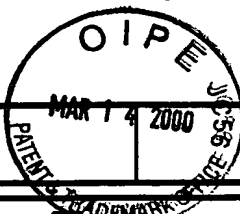
Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Graham	Middle Initial		Family Name	BUTLER	Suffix e.g. Jr.	
Inventor's Signature	G. Butler.				Date	Dec. 3rd 1999	

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Applicant Authority							

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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+

# DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name		Michael				Middle Initial				Family Name		LEACH				Suffix e.g. Jr.									
Inventor's Signature										Date		Dec. 3rd 1999													
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City		Nottingham				State				Zip		NG16 2QS				Country		United Kingdom				Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.									
Inventor's Signature										Date															
Residence: City						State				Country						Citizenship									
Post Office Address																									
Post Office Address																									
City						State				Zip						Country						Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.									
Inventor's Signature										Date															
Residence: City						State				Country						Citizenship									
Post Office Address																									
Post Office Address																									
City						State				Zip						Country						Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.									
Inventor's Signature										Date															
Residence: City						State				Country						Citizenship									
Post Office Address																									
Post Office Address																									
City						State				Zip						Country						Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.									
Inventor's Signature										Date															
Residence: City						State				Country						Citizenship									
Post Office Address																									
Post Office Address																									
City						State				Zip						Country						Applicant Authority			

☐ Additional inventors are being named on supplemental sheet(s) attached hereto